

AMENDED IN ASSEMBLY JUNE 2, 1997

AMENDED IN ASSEMBLY MAY 1, 1997

AMENDED IN ASSEMBLY APRIL 17, 1997

AMENDED IN ASSEMBLY APRIL 7, 1997

CALIFORNIA LEGISLATURE—1997–98 REGULAR SESSION

## ASSEMBLY BILL

No. 833

Introduced by Assembly Members Ortiz and Perata

February 27, 1997

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An act to amend Section 1367.66 of, and to add Sections 138.4, ~~138.5, and 138.6~~ and 138.5 to, the Health and Safety Code, to amend Section 10123.18 of the Insurance Code, ~~and to amend Section 14132.17 of the Welfare and Institutions Code, relating to ovarian cancer.~~ Code, relating to cancer.

### LEGISLATIVE COUNSEL'S DIGEST

AB 833, as amended, Ortiz. ~~Ovarian cancer~~ *Gynecological cancers.*

(1) Existing law, known as the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of specified health care service plans, administered by the Commissioner of Corporations. Existing law also provides for the regulation of policies of disability insurance administered by the Insurance Commissioner.

Existing law requires that health care service plan contracts and disability insurance policies provide coverage for prescribed services and treatments. It provides that any of

these plans and policies, except for a specialized health care service plan, issued, amended, or renewed on or after January 1, 1991, that include coverage for treatment or surgery of cervical cancer also include coverage for an annual cervical cancer screening test upon certain referrals.

This bill would provide, with certain exceptions, that a health care service plan contract and disability insurance policy that is issued, amended, or renewed on or after January 1, 1998, that includes coverage for treatment or surgery of ovarian cancer also includes coverage for an ovarian cancer screening test upon certain referrals. The bill would provide, with regard to disability insurers, that the bill's requirements apply regardless of the situs of the contract. ~~The bill would provide that the tests are a covered benefit under Medi-Cal as prescribed by the bill.~~

(2) Existing law establishes the Office of Women's Health within the State Department of Health Services. The functions of the office, include, among others, to communicate and disseminate information and perform a liaison function within the department and to providers of health, social, educational, and support services to women.

This bill would establish within the office the ~~Ovarian Cancer~~ *Women's Gynecological* Information Program to provide information for consumers, patients, and health care providers relating to ~~ovarian cancer~~ *women's gynecological cancers*. The bill would require the office, in consultation with certain persons, to produce, ~~make available to others for reproduction,~~ or contract with others to develop the materials required by this provision, as the office deems appropriate, to be made available to the public free of charge. The bill would require the office to require, where appropriate, health care providers to provide or make available these materials to patients *and would require the Medical Board of California and the Board of Registered Nursing to distribute these materials.*

The bill would require every medical care provider primarily responsible for providing to a patient an annual gynecological examination to ~~notify~~ *provide* that patient during the annual examination ~~that PAP-smears often do not detect ovarian cancer and include in the notice a description~~

~~of the symptoms of ovarian cancer a standardized summary in layperson's language and in a language understood by the patient containing a description of the symptoms and methods for diagnosing gynecological cancers.~~

~~The bill would also require the department to direct a study of the effectiveness of the CA 125 assay as a mechanism to diagnose ovarian cancer.~~

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 138.4 is added to the Health and  
2 Safety Code, to read:  
3 138.4. (a) There is hereby established within the  
4 office, the ~~Ovarian~~ Women's Gynecological Cancer  
5 Information Program. The program shall provide  
6 information to consumers, patients, and health care  
7 providers regarding ~~ovarian cancer~~ women's  
8 *gynecological cancers*, including, signs and symptoms,  
9 risk factors, the benefits of early detection through  
10 appropriate diagnostic testing, and treatment options.  
11 (b) The program may include, but is not limited to, the  
12 following elements:  
13 (1) Educational and informational materials in print,  
14 audio, video, electronic, or other media.  
15 (2) Public service announcements and  
16 advertisements.  
17 (3) The establishment of toll-free telephone hotlines  
18 to provide information.  
19 (c) (1) The office shall produce, ~~make available to~~  
20 ~~others for reproduction~~, or contract with others to  
21 develop the materials described in this section as the  
22 director deems appropriate. These materials shall be  
23 made available to the public free of charge *and shall be*  
24 *distributed by the Medical Board of California and the*  
25 *Board of Registered Nursing*.  
26 (2) The office shall require, as it deems appropriate,  
27 health care providers to make these materials available to  
28 patients.

(d) In exercising the powers under this section, the office shall consult with appropriate health care professionals and providers, consumers, and patients, or organizations representing them.

(e) The office shall appoint ~~an Ovarian~~ *a Women's Gynecological Cancer Information Advisory Council* which shall include representation from health care professionals and providers, consumers, patients, and other appropriate interests. The members of the council shall receive no compensation for their services, but shall be allowed their actual and necessary expenses incurred in the performance of their duties.

(f) In addition to any state funds appropriated for the program, the office may accept grants from public or private sources for the program. The office, in administering this section, shall seek to coordinate the program with other public and private efforts and may undertake joint or cooperative programs with other public or private entities.

(g) The office may adopt any regulations necessary and appropriate for the implementation of this section.

SEC. 2. Section 138.5 is added to the Health and Safety Code, to read:

138.5. (a) The medical care provider primarily responsible for providing to a patient an annual gynecological examination shall provide to that patient ~~during the annual examination notice of all of the following:~~

~~(1) Inform the patient that PAP smears often do not detect ovarian cancer.~~

~~(2) Provide the patient with a description of the symptoms of ovarian cancer.~~ *during the annual examination a standardized summary in layperson's language and in a language understood by the patient containing a description of the symptoms and appropriate methods of diagnoses for gynecological cancers. Use of existing publications developed by nationally recognized cancer organizations are not precluded by this section.*

(b) For the purposes of this section, “medical care provider” means a health care professional licensed pursuant to Division 2 (commencing with Section 500) of the Business and Professions Code or pursuant to an initiative act referred to in that division providing medical care within his or her lawful scope of practice.

~~SEC. 3. Section 138.6 is added to the Health and Safety Code, to read:~~

~~138.6. The office shall direct a study of the effectiveness of the CA-125 assay as a mechanism to diagnose ovarian cancer as compared to nonuse of CA-125.~~

~~SEC. 4.—~~

SEC. 3. Section 1367.66 of the Health and Safety Code is amended to read:

1367.66. (a) Every individual or group health care service plan contract, except for a specialized health care service plan, which is issued, amended, or renewed, on or after January 1, 1991, and which includes coverage for treatment or surgery of cervical cancer shall also be deemed to provide coverage for an annual cervical cancer screening test upon the referral of the patient’s physician, a nurse practitioner, or certified nurse midwife, providing care to the patient and operating within the scope of practice otherwise permitted for the licensee.

(b) Every individual or group health care service plan contract, except for a specialized health care service plan, which is issued, amended, or renewed on or after January 1, 1998, and which includes coverage for treatment or surgery of ovarian cancer shall also be deemed to provide coverage for an ovarian cancer screening test upon the referral of the patient’s physician, a nurse practitioner, or certified nurse midwife providing care to the patient and operating within the scope of practice otherwise permitted for the licensee.

(c) Nothing in this section shall be construed to establish a new mandated benefit or to prevent application of deductible or copayment provisions in an existing policy or plan. The Legislature intends in this

1 section to provide that cervical or ovarian cancer  
2 screening services are deemed to be covered if the policy  
3 includes coverage for cervical or ovarian cancer  
4 treatment or surgery.

5 ~~SEC. 5.—~~

6 *SEC. 4.* Section 10123.18 of the Insurance Code is  
7 amended to read:

8 10123.18. (a) Every individual or group policy of  
9 disability insurance, regardless of the situs of the contract,  
10 which is issued, amended, or renewed, on or after January  
11 1, 1991, and which includes coverage for treatment or  
12 surgery of cervical cancer shall also be deemed to provide  
13 coverage, upon the referral of a patient's physician, a  
14 nurse practitioner, or a certified nurse midwife,  
15 providing care to the patient and operating within the  
16 scope of practice otherwise permitted for the licensee, for  
17 an annual cervical cancer screening test.

18 (b) Every individual or group policy of disability  
19 insurance, regardless of the situs of the contract, which is  
20 issued, amended, or renewed on or after January 1, 1998,  
21 and which includes coverage for treatment or surgery of  
22 ovarian cancer shall also be deemed to provide coverage,  
23 upon the referral of a patient's physician, a nurse  
24 practitioner, or a certified nurse midwife providing care  
25 to the patient and operating within the scope of practice  
26 otherwise permitted for the licensee, for an ovarian  
27 cancer screening test.

28 (c) Nothing in this section shall be construed to  
29 require an individual or group policy to cover treatment  
30 or surgery for cervical or ovarian cancer or to prevent  
31 application of deductible or copayment provisions  
32 contained in the policy or plan, nor shall this section be  
33 construed to require that coverage under an individual or  
34 group policy be extended to any other procedures.

35 (d) Nothing in this section shall be construed to apply  
36 to a policy of disability insurance that only covers a  
37 specified disease, specified accidents, or any accidents, if  
38 the disability insurer at the time of issuance of the policy  
39 and annually thereafter determines whether each  
40 insured or person covered by the policy also has coverage



1 for an annual cervical cancer screening test from another  
2 disability insurer, a nonprofit hospital service plan, or a  
3 health care service plan, and provided that any insured  
4 or person covered by the policy who does not have other  
5 coverage for annual cervical cancer screening shall have  
6 that coverage under the policy.

7 ~~SEC. 6. Section 14132.17 of the Welfare and~~  
8 ~~Institutions Code is amended to read:~~

9 ~~14132.17. (a) Annual cervical cancer tests for~~  
10 ~~screening or diagnostic purposes, upon the referral of a~~  
11 ~~patient's physician, is a covered benefit under this~~  
12 ~~chapter, on or after January 1, 1991, to the extent required~~  
13 ~~or permitted by federal law.~~

14 ~~(b) Ovarian cancer tests for screening or diagnostic~~  
15 ~~purposes upon the referral of a patient's physician, is a~~  
16 ~~covered benefit under this chapter, on or after January 1,~~  
17 ~~1998, to the extent required or permitted by federal law.~~

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